

MEDICAL EXAMINING BOARD
Room 121A, 1400 E. Washington Avenue, Madison
Contact: Tom Ryan (608) 266-2112
October 16, 2013

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

8:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda (1-4)**
- B. Approval of Minutes of September 18, 2013 (5-12)**
- C. Administrative Updates**
 - 1. DSPS Economic Impact Report – APPEARANCE – Katie Koschnick **(13-14)**
 - 2. Survey on Potential Agency Merger
- D. Speaking Engagements - Discussion and Consideration**
 - 1. Medical College of Wisconsin Department of Otolaryngology – December 5, 2013 – Ken Simons **(47-48)**
- E. 8:15 A.M. APPEARANCE – Attorney Arthur Thexton**
 - 1. Presentation of Petition for Summary Suspension in Case Number 13 MED 277, George Darrel Soncrant, D.O. **(363-374)**
 - 2. Presentation of Proposed Stipulation, Final Decision and Order in Case Number 13 MED 277, George Darrel Soncrant, D.O. **(395-401)**
- F. Administrative and Legislative Rule Matters – Discussion and Consideration**
 - 1. Continuing Education Audit – Scope Statement **(15-16)**
- G. FSMB Matters - Discussion**
- H. Update on Interstate Compact for Medical Licensure – Discussion and Consideration (17-22)**

- I. Informational Items – Discussion and Consideration**
 - 1. Consider Expansion of Use of Federation Credentials Verification Service (FCVS) **(23-26)**
- J. Fall Newsletter – Content Review (27-46)**
- K. Motions – Discussion and Consideration**
 - 1. Request for Motion delegating authority of the Board to determine probable cause to initiate disciplinary proceedings in conjunction with a petition for summary suspension **(49-50)**
- L. Screening Panel Report**
- M. Items Added After Preparation of Agenda:**
 - 1. Introductions, Announcements and Recognition
 - 2. Executive Director Matters
 - 3. Education and Examination Matters
 - 4. Credentialing Matters
 - 5. Practice Matters
 - 6. Disciplinary Matters
 - 7. Legislation/Administrative Rule Matters
 - 8. Informational Items
 - 9. Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
 - 10. Presentation of Proposed Decision(s)
 - 11. Presentation of Interim Order(s)
 - 12. Petitions for Re-Hearing
 - 13. Petitions for Summary Suspension
 - 14. Petitions for Assessments
 - 15. Petitions to Vacate Orders
 - 16. Petitions for Designation of Hearing Examiner
 - 17. Requests for Disciplinary Proceeding Presentations
 - 18. Motions
 - 19. Petitions
 - 20. Appearances from Requests Received or Renewed
 - 21. Speaking Engagement, Travel, and Public Relation Requests
- N. Public Comments**

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85 (1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85 (1)(b), Stats.); to consider closing disciplinary investigation with administrative warning (ss. 19.85 (a)(b), Stats. and 448.03(8), Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and, to confer with legal counsel (s. 19.85 (1)(g), Stats.).

- O. Full Board Oral Exam of Candidates for Licensure**
 - 1. **10:15 A.M. – APPEARANCE** – Jamey L. Walker, M.D. **(51-106)**
 - 2. **10:30 A.M. – APPEARANCE** – Kaukab P. Shah, M.D. **(107-152)**

3. **10:45 A.M. – APPEARANCE – Ravi K. Pasupuleti, M.D. (153-196)**
- P. Monitoring Matters – Discussion and Consideration**
1. **11:00 A.M. – APPEARANCE - Roger Pellmann, M.D. – Requesting Rescission of Suspension (197-240)**
 2. **Kirsten Peterson, M.D. – Requesting Reduction in Drug and Alcohol Screens (241-256)**
 3. **George Boyum, M.D. – Requesting Order to Amend and Rescind Previous Orders and the Amended Final Decision and Order and vote whether to approve these orders (257-266)**
- Q. Litigation Discussion – Planned Parenthood v. MEB – MEB Attorney Pam Stach (267-268)**
- R. Requesting Rescission of Board Motion to Deny Application for Medical Licensure – Nipa H. Sinh, M.D. (269-330)**
- S. Petition for Authorization to Request Extension of Time in Case Number 12 MED 381, Graig Aders, M.D. and David Drake, M.D. (331-336)**
- T. Deliberation of Administrative Warnings**
1. **12 MED 219 (R.L.E.) (337-338)**
 2. **13 MED 079 (J.A.M.) (339-340)**
- U. Presentation and Deliberation of Proposed Stipulations, Final Decisions and Orders**
1. **12 MED 375 – Bruce A. Kraus, M.D. (341-348)**
 2. **12 MED 440 – Paul Strapon III, M.D. (349-356)**
 3. **13 MED 133 – Arvind Ahuja, M.D. (357-362)**
- V. Deliberation of Petition for Summary Suspension in Case Number 13 MED 277 – George Darrel Soncrant, D.O. (363-374)**
- W. Deliberation of Complaint for Determination of Probable Cause in Case Number 13 MED 277 – George Darrel Soncrant, D.O. (375-378)**
- X. Deliberation of Petition for Designation of Hearing Official in Case Number 13 MED 277 – George Darrel Soncrant, D.O. (379-382)**
- Y. Deliberation of Proposed Stipulation, Final Decision and Order in the Case Number 13 MED 277 – George Darrel Soncrant, D.O. (395-401)**
- Z. DLSC Matters**
1. **Case Status Report (383-390)**

2. Case Closings
 - a. 11 MEB 281 (H.M.T.) **(391-394)**

AA. Consulting with Legal Counsel

BB. Deliberation of Items Added After Preparation of the Agenda

1. Disciplinary Matters
2. Education and Examination Matters
3. Credentialing Matters
4. Proposed Stipulations, Final Decisions and Orders
5. Proposed Decisions
6. Proposed Interim Orders
7. Complaints
8. Petitions for Summary Suspension
9. Remedial Education Cases
10. Petitions for Extension of Time
11. Petitions for Assessments and Evaluations
12. Petitions to Vacate Orders
13. Motions
14. Administrative Warnings
15. Matters Relating to Costs
16. Appearances from Requests Received or Renewed
17. Monitoring Matters
18. Professional Assistance Procedure (PAP) Matters
19. Case Status Report
20. Case Closings
21. FSMB Matters

CC. Ratifying Examination Results, Licenses, and Certificates

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

DD. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

EE. Open Session Items Noticed Above not Completed in the Initial Open Session

ADJOURNMENT

**CONVENE TO LICENSING COMMITTEE MEETING IMMEDIATELY FOLLOWING
FULL BOARD MEETING
12:00 P.M.**

ATTENDEES: Kenneth Simons, Gene Musser, Timothy Swan, Timothy Westlake

**ORAL EXAMINATION OF CANDIDATES FOR LICENSURE
ROOM 121A, B, C, AND 199B
12:30 P.M.**

CLOSED SESSION – Reviewing applications and conducting oral examinations of fourteen (14) candidates for licensure – Drs. Ogland, Misra, Erickson, and Vasudevan

**MEDICAL EXAMINING BOARD
MEETING MINUTES
SEPTEMBER 18, 2013**

PRESENT: James Barr; Kenneth Simons, MD; Greg Collins; Carolyn Ogland, MD; Timothy Westlake, MD; Timothy Swan, MD; Mary Jo Capodice, DO; Jude Genereaux; Rodney Erickson, MD; Suresh Misra, MD; Russell Yale, MD; Gene Musser, MD; and Sridhar Vasudevan, MD

STAFF: Tom Ryan, Executive Director; Joshua Archiquette, Bureau Assistant; and other Department Staff

CALL TO ORDER

Kenneth Simons, Chair, called the meeting to order at 8:00 a.m. A quorum of thirteen (13) was confirmed.

ADOPTION OF AGENDA

MOTION: Timothy Swan moved, seconded by Suresh Misra, to adopt the agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES

MOTION: Sridhar Vasudevan moved, seconded by Suresh Misra, to approve the minutes of August 14, 2013 as published. Motion carried unanimously.

MOTION: Suresh Misra moved, seconded by Barr, to approve the minutes of August 23, 2013 as published. Motion carried unanimously.

MOTION: Greg Collins moved, seconded by Sridhar Vasudevan, to approve the minutes of August 30, 2013 as published. Motion carried unanimously.

LEGISLATIVE AND ADMINISTRATIVE RULE MATTERS

MOTION: Gene Musser moved, seconded by Greg Collins, to authorize Timothy Swan to approve the proposed rule draft of MED 1.02 relating to Diploma Copy Requirements for submission to the Clearinghouse. Motion carried unanimously.

MOTION: Sridhar Vasudevan moved, seconded by Gene Musser, to accept the amendments, approve the rule as amended and authorizes submission of Draft of Clearinghouse Rule 12-005 to the Legislature. Motion carried unanimously.

MOTION: Gene Musser moved, seconded by Timothy Swan, to recommend to the Podiatry Affiliated Credentialing Board that attendees successfully complete an examination demonstrating knowledge and understanding of the topics under POD 7.01(3). Motion carried unanimously.

Timothy Swan left the meeting at 9:00 a.m.

MOTION: Sridhar Vasudevan moved, seconded by Jude Genereaux, to adopt the suggested changes to the Position Statement regarding Guidelines for Physicians Who Are Treating Chronic Pain or Prescribing Controlled Substances for the Treatment of Pain to read as follows:

No. More information on this topic can be found at the FSMB website.

Motion carried unanimously.

MOTION: Timothy Westlake moved, seconded by Sridhar Vasudevan, to remove the remaining Position Statements from the website and table the discussion about the remaining Position Statements until the October 2013 meeting. Motion carried unanimously.

SPEAKING ENGAGEMENTS

MOTION: Mary Jo Capodice moved, seconded by Suresh Misra, to designate Timothy Swan, MD; as the Board's representative to attend the 2013 Wisconsin Radiological Society Meeting for their presentation on "Recent changes in MED 10 and Licensing Updates" on Saturday, November 2, 2013. Motion carried unanimously.

MOTION: Jude Genereaux moved, seconded by Suresh Misra, to designate Kenneth Simons, MD as the Board's representative to attend the MCW – Marquette Alumni Meeting at February 25, 2014. Motion carried unanimously.

FSMB MATTERS

MOTION: Timothy Westlake moved, seconded by Rodney Erickson, to nominate Greg Collins as the Board's representative as a Candidate for the FSMB Nominating Committee and to seek appointment to the Ethics Committee of the Federation of State Medical Boards. Motion carried unanimously.

MOTION: Russell Yale moved, seconded by Timothy Westlake, to nominate Sridhar Vasudevan, MD as the Board's representative as a Candidate for FSMB Board of Directors. Motion carried unanimously.

DISCIPLINARY MATTERS

MOTION: Jude Genereaux moved, seconded by Suresh Misra, to have the Board Chair or Vice Chair if the Chair is unavailable designate two (2) Board members pursuant to 448.02(4) to hear any petition for summary suspension with the Chair prior to the October board meeting. Further the Board designates the Chair or Vice Chair if the chair is unavailable and two (2) board members to make a finding of probable cause, if appropriate, regarding any complaint submitted in conjunction with the summary suspension. Motion carried unanimously.

SCREENING PANEL REPORT

Mr. Jim Barr reported that eighteen (18) cases were opened. Nineteen (19) cases were closed. Three (3) ten-day letters were sent.

CLOSED SESSION

MOTION: Greg Collins moved seconded by Suresh Misra, to convene to closed session to deliberate on cases following hearing § 19.85 (1) (a), Stats.; consider closing disciplinary investigations with administrative warning § 19.85 (1)(b), Stats., and 440.205, Stats., to consider individual histories or disciplinary data § 19.85(1) (f), Stats., and, to confer with legal counsel § 19.85 (1) (g), Stats.). Kenneth Simons read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: James Barr – yes; Kenneth Simons – yes; Greg Collins – yes; Timothy Westlake – yes; Mary Jo Capodice – yes; Rodney Erickson – yes; Russell Yale – yes; Sridhar Vasudevan – yes; Gene Musser – yes; Suresh Misra – yes; and Carolyn Ogland – yes. Motion carried unanimously.

The Board convened into Closed Session at 10:29 a.m.

MONITORING MATTERS

MOTION: Suresh Misra moved, seconded by Carolyn Ogland, to deny the request of John Hale, MD for interruption of drug screens. **Reason for Denial:** Non-compliance with the terms of the order. Motion carried unanimously.

MOTION: Suresh Misra moved, seconded by James Barr, to deny the request of Terrance Moe, MD for full licensure. **Reason for Denial:** Comments from the mentor. Motion carried unanimously.

PROPOSED STIPULATIONS, FINAL DECISIONS AND ORDERS

Jerry N. Yee, DO

MOTION: Jude Genereaux moved, seconded by Suresh Misra, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Jerry N. Yee, DO (12 MED 263). Motion carried unanimously.

Kent Gregory Brockmann, MD

MOTION: Sridhar Vasudevan moved, seconded by Russell Yale, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Kent Gregory Brockman, MD (13 MED 229). Motion carried unanimously.

PRESENTATION AND DELIBERATION OF ITEMS FROM DLSC ATTORNEY SANDRA NOWACK

Proposed Stipulations, Final Decisions and Orders

MOTION: Suresh Misra moved, seconded by Timothy Westlake, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Devinder K. Sidhu, MD (13 MED 005). Motion carried unanimously.

MOTION: Sridhar Vasudevan moved, seconded by Gene Musser, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Judith L. Chantelois, MD (13 MED 130). Motion carried.

Rodney Erickson abstained from voting in the above matter

MOTION: Suresh Misra moved, seconded by Rodney Erickson, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against LuAnn Moraski, DO (13 MED 180). Motion carried unanimously.

PRESENTATION AND DELIBERATION OF ITEMS FROM DLSC ATTORNEY KIM KLUCK

Proposed Stipulations, Final Decisions and Orders

MOTION: Jude Genereaux moved, seconded by Timothy Westlake, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Kenneth Raskin, MD (13 MED 046). Motion carried unanimously.

Complaint for Determination of Probable Cause

MOTION: Sridhar Vasudevan moved, seconded by James Barr, to find probable cause to believe that Cha Lee, MD - Case Number 11 MED 232 - is guilty of unprofessional conduct and therefore issue the Complaint and hold a hearing on such conduct pursuant to Wis. Stat. sec. 448.02(3)(b). Motion carried unanimously.

PRESENTATION AND DELIBERATION OF ITEMS FROM DLSC ATTORNEY ARTHUR THEXTON

Administrative Warnings

MOTION: Suresh Misra moved, seconded by Greg Collins, to issue an administrative warning in the matter of case number 11 MED 400 (V.S.C.). Motion carried.

Gene Musser abstained from voting in the above matter.

Proposed Stipulations, Final Decisions and Orders

MOTION: Gene Musser moved, seconded by Sridhar Vasudevan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Fredrick E. Ekberg, MD (13 MED 048). Motion carried unanimously.

PRESENTATION AND DELIBERATION OF PROPOSED DECISIONS AND FINAL ORDERS

MOTION: Timothy Westlake moved, seconded by Russell Yale, to adopt the Findings of Fact, Conclusions of Law, Proposed Decision and Order in the matter of disciplinary proceedings against Ronald Plemmons, MD, Respondent – DHA Case # SPS-13-0022/DLSC Case # 12 MED 231. Motion carried.

Mary Jo Capodice abstained from voting in the above matter.

PRESENTATION AND DELIBERATION OF ORDER FIXING COSTS

MOTION: Gene Musser moved, seconded by Sridhar Vasudevan, to adopt the Order Fixing Costs in the matter of Leonard Green (12 MED 339). Motion carried unanimously.

DLSC MATTERS

Case Closures

MOTION: Timothy Westlake moved, seconded by Greg Collins, to close case # 12 MED 390 (K.S.S.) for NV (No Violation). Motion carried unanimously.

MOTION: Mary Jo Capodice moved, seconded by James Barr, to close case # 12 MED 407 (K.L.) for P2 (Prosecutorial Discretion). Motion carried unanimously.

MOTION: Greg Collins moved, seconded by Timothy Westlake, to close case # 13 MED 032 (E.J.C.) for P5 (Prosecutorial Discretion). Motion carried.

Rodney Erickson abstained from voting in the above matter.

MOTION: Suresh Misra moved, seconded by Greg Collins, to close case # 13 MED 057 (H.B.) for NV (No Violation). Motion carried unanimously.

MOTION: Rodney Erickson moved, seconded by Carolyn Ogland, to close case # 13 MED 067 (D.L.P.) for NV (No Violation). Motion carried unanimously.

MOTION: Suresh Misra moved, seconded by Timothy Westlake, to close case # 13 MED 081 (A.D.F) for IE (Insufficient Evidence). Motion carried unanimously.

MOTION: Rodney Erickson moved, seconded by Timothy Westlake, to close case # 13 MED 107 (A.H.B.) for IE (Insufficient Evidence). Motion carried unanimously.

MOTION: Jude Genereaux moved, seconded by Sridhar Vasudevan, to close case # 13 MED 137 (J.D.M.) for IE (Insufficient Evidence). Motion carried unanimously.

MOTION: Mary Jo Capodice moved, seconded by Russell Yale, to close case # 13 MED 147 (P.M.B. & J.W.H.) for NV (No Violation). Motion carried.

Gene Musser abstained from voting in the above matter.

MOTION: Sridhar Vasudevan moved, seconded by Russell Yale, to close case # 13 MED 148 (A.I.) for P5 (Prosecutorial Discretion) with a flag. Motion carried unanimously.

MOTION: Timothy Westlake moved, seconded by James Barr, to close case # 13 MED 162 (J.R.M.) for NV (No Violation). Motion carried unanimously.

MOTION: Sridhar Vasudevan moved, seconded by Russell Yale, to close case # 13 MED 168 (J.L.R.) for P3 (Prosecutorial Discretion). Motion carried unanimously.

MOTION: Gene Musser moved, seconded by Greg Collins, to close case # 13 MED 218 (S.L.A.) for NV (No Violation). Motion carried unanimously.

RECONSIDERATION OF BOARD DECISION REGARDING FULL BOARD ORAL REQUIREMENT FOR DASHELL J. SLABBERT, MD

MOTION: Russell Yale moved, seconded by Carolyn Ogland, that on the basis of additional information received the Board finds there is no evidence of adverse formal action and a Full Board Oral examination is not required. The Board further grants licensure when all requirements have been met. Motion carried.

Sridhar Vasudevan voted no in the above matter.

SEEKING EQUIVALENCY FOR 12 MONTHS OF ACGME APPROVED POST-GRADUATE TRAINING BASED ON EDUCATION AND TRAINING

MOTION: Suresh Misra moved, seconded by Greg Collins, to find that the training and education of Oussama Darwish, MD is not substantially equivalent to requirement set forth in 448.05(2). Motion carried.

Mary Jo Capodice voted no in the above motion.

Sridhar Vasudevan abstained from voting in the above motion

RATIFY ALL LICENSES AND CERTIFICATES

MOTION: Sridhar Vasudevan moved, seconded by Gene Musser, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Suresh Misra moved, seconded by Timothy Westlake, to reconvene into open session. Motion carried unanimously.

The Board reconvened into Open Session at 12:41 p.m.

VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION, IF VOTING IS APPROPRIATE

MOTION: Jude Genereaux moved, seconded by Sridhar Vasudevan, to affirm all motions made in closed session. Motion carried unanimously.

Timothy Swan returned to the meeting at 12:42 p.m.

**NATIONAL GOVERNORS ASSOCIATION SURVEY ON FEDERAL
RECOMMENDATIONS TO ADDRESS PRESCRIPTION DRUG ABUSE**

MOTION: Rodney Erickson moved, seconded by Gene Musser, to delegate Sridhar Vasudevan, MD to complete the NGA Survey on Federal Recommendations to Address Prescription Drug Abuse and delegate Kenneth Simons, MD to give final review for submission to the Governor's Office. Motion carried unanimously.

ADJOURNMENT

MOTION: Sridhar Vasudevan moved, seconded by Suresh Misra, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:53 p.m.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Joshua Archiquette, Bureau Assitant		2) Date When Request Submitted: 10/4/13 <small>Items will be considered late if submitted after 4:30 p.m. and less than 8 work days before the meeting.</small>	
3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 10/16/13	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? DSPS Economic Impact Report Appearance Katie Koschnick	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input checked="" type="checkbox"/> Yes (Fill out Board Appearance Request) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Shawn Leatherwood		2) Date When Request Submitted: September 24, 2013																
		Items will be considered late if submitted after 4:30 p.m. and less than: ▪ 10 work days before the meeting for Medical Board ▪ 08 work days before the meeting for all others																
3) Name of Board, Committee, Council, Sections: Medial Examining Board																		
4) Meeting Date: October 16, 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Review of CE Audit Scope Statement																
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A																
10) Describe the issue and action that should be addressed: The Board will review and discuss the scope statement for CE audits and review the recommendation made by the Governor's office.																		
<table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;">11)</td> <td style="width: 20%; border: none; text-align: center;">Authorization</td> <td style="width: 40%; border: none;"></td> </tr> <tr> <td style="border: none;">Shawn Leatherwood</td> <td style="border: none; text-align: center;">September 24, 2013</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Signature of person making this request</td> <td style="border: none; text-align: center;">Date</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Supervisor (if required)</td> <td style="border: none; text-align: center;">Date</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Bureau Director signature (indicates approval to add post agenda deadline item to agenda)</td> <td style="border: none; text-align: center;">Date</td> <td style="border: none;"></td> </tr> </table>				11)	Authorization		Shawn Leatherwood	September 24, 2013		Signature of person making this request	Date		Supervisor (if required)	Date		Bureau Director signature (indicates approval to add post agenda deadline item to agenda)	Date	
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3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 10/16/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Update on Interstate Compact for Medical Licensure	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
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From: [Ryan, Thomas - DSPS](#)
To: [Archiquette, Joshua N - DSPS](#)
Cc: [REDACTED]
Subject: FW: Update on Interstate Compact for Medical Licensure
Date: Wednesday, September 25, 2013 3:14:52 PM
Attachments: [Compact Consensus Principles.doc](#)

Josh, please add the e-mail, which also includes the attachment at the bottom, to the next MEB agenda with the title same as the subject line.

From: Humayun Chaudhry [mailto:hchaudhry@fsmb.org]
Sent: Wednesday, September 25, 2013 3:10 PM
To: Humayun Chaudhry
Cc: Jon Thomas, MD (FSMB)
Subject: Update on Interstate Compact for Medical Licensure

Dear Colleague:

I'm writing today to provide you with an update about **recent encouraging progress** in our new initiative to develop a **model interstate compact for medical licensure**. I intend to send a similar note to the state medical board Chairs/Presidents tomorrow.

As you know, at our 2013 Annual Meeting, the FSMB House of Delegates unanimously called for the FSMB to convene representatives from state medical boards and special experts to actively explore the use of an interstate compact model to **facilitate license portability**.

This directive was driven by factors in our fast-changing health care system, ranging from **demographic shifts** and the **need for better and faster access to medical care** to the **passage of the Affordable Care Act** and the **increased use of telemedicine**. As our health care system continues to change, the need for increased license portability has become more pressing than ever.

The state medical board community has, to its credit, recognized the need for leadership in this new environment and responded by exploring a promising new cooperative model that would dramatically streamline the process for acquiring medical licenses in multiple states.

Interstate compacts have proven to be effective in addressing a wide variety of circumstances and issues that have multi-state impact – allowing states to cooperatively address mutual concerns **without resorting to federal intervention**.

Following the Annual Meeting, a planning group of representatives from several state medical boards and experts in the creation of interstate compacts convened in June to begin discussions at the FSMB Texas Office.

Building upon discussions begun during that initial meeting, an expanded Interstate Compact Taskforce (ICT) -- made up of representatives from state medical boards, the FSMB, and consultants with expertise in state compacts – met September 10-11 in Washington, DC. The ICT finalized **a set of recommendations for an initial framework** of an interstate medical licensure compact for states to consider. These recommendations, which will be used to guide the formation of a model compact when a legislative drafting team begins its work later this year, include **eight foundational principles**, which are attached to this email and also

appear at the very bottom of this e-mail.

In general, the ICT recommendations envision a compact model that would:

- **Maintain state authority and control.** A successful interstate compact framework should retain state-based licensure and state control of the licensing process – but it should at the same time streamline significantly the process of license application and renewal for eligible physicians. A compact would NOT entail a “national” license. State boards will not give up their authority in this new system, and participation in an interstate compact will not compromise their ability to generate fees.
- **Establish high standards for physician eligibility.** A proposed framework should adhere to the highest standards of eligibility for physicians who practice within it, in order to ensure patient safety and protection. Not all physicians will qualify to participate in a compact – only those who meet rigorous requirements.
- **Ensure a well-coordinated and fairly-applied system of oversight and discipline:** An effective interstate compact must include a cooperative system of information-sharing and rapid adjudication of disciplinary issues between states. The proposed framework should demonstrate to state medical boards and the public constituents they represent that the oversight of physician activity remains well-coordinated, strong and effective.

With such foundational guidelines in place, the task of creating a detailed compact framework now enters **the drafting phase**. A group of state medical board representatives will begin that work in the weeks ahead and we will keep you apprised of their progress.

Our work on the creation of an interstate compact is particularly timely. On September 10, Reps. Devin Nunes (R-CA-22) and Frank Pallone (D-NJ-6) introduced HR 3077, **The TELEmedicine for MEDicare Act of 2013**. The bill allows for a Medicare provider, licensed in one state, to treat any Medicare beneficiary in another state via telemedicine without requiring additional state licensure where the patient is located. Under this legislation, the provider would remain under the jurisdiction of the state medical board where he/she is licensed for the purposes of discipline, effectively eliminating the “practice of medicine occurring where the patient is located” under such circumstances.

We believe that the **creation of an interstate compact model to facilitate multi-state practice is a better alternative** – and we are optimistic about its prospects.

The FSMB will continue to advocate forcefully for a **state-based medical regulatory system**, while acknowledging the need for new models of licensing – such as the interstate compact -- that meet the new demands for license portability.

In the months ahead, at regional meetings of AIM and at our FSMB annual meeting in April in

Denver, we will keep you updated on the progress that is being made on the interstate compact. Please feel free to contact me directly in the interim if you have any questions about our work.

Sincerely,

Hank

Humayun J. Chaudhry, D.O., M.S., MACP, FACOI
President and CEO

Federation of State Medical Boards
1300 Connecticut Avenue NW | Suite 500 | Washington, DC 20036
202-436-4007 direct | 817-868-8888 fax

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Consensus Principles for an Interstate Compact for Medical Licensure

- Participation in an interstate compact for medical licensure will be strictly voluntary for both physicians and state boards of medicine.
- Generally, participation in an interstate compact creates another pathway for licensure, but does not otherwise change a state's existing *Medical Practice Act*.
- The practice of medicine occurs where the patient is located at the time of the physician-patient encounter and, therefore, requires the physician to be under the jurisdiction of the state medical board where the patient is located.
- An interstate compact for medical licensure will establish a mechanism whereby any physician practicing in the state will be known by, and under the jurisdiction of, the state medical board where the practice of medicine occurs.
- Regulatory authority will remain with the participating state medical boards and will not be delegated to any entity that administers the compact.
- A physician practicing under an interstate compact is bound to comply with the statutes, rules and regulations of each compact state wherein he/she chooses to practice medicine.
- State medical boards participating in an interstate compact are required to share complaint/investigative information with each other.

- The license to practice medicine may be revoked by any or all of the compact states.

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Joshua Archiquette, Bureau Assitant		2) Date When Request Submitted: 10/4/13 <small>Items will be considered late if submitted after 4:30 p.m. and less than 8 work days before the meeting.</small>	
3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 10/16/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Consider Expansion of Use of Federation Credentials Verification Service (FCVS)	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: The Board will consider the attached documents			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)			
Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Federation of
**STATE
MEDICAL
BOARDS**

Thomas H. Ryan, JD, MPA
State of Wisconsin Dept of Safety & Professional Services
Dept of Regulation & Licensing
1400 E Washington Ave Rm 178
Madison, WI 53708-3041

August 28, 2013

Dear Mr. Ryan,

The Federation of State Medical Boards (FSMB) published *Assessing Scope of Practice in Health Care Delivery: Critical Questions in Assuring Public Access and Safety* in 2005. The policy indicated that decision makers should examine the formal education and training received by practitioners. Projected physician shortages and scope of practice issues are leaving many organizations to fill a gap with other healthcare providers. These are two issues that make it essential for a review and validation of a health care professions' education and training by an objective, independent body.

With this in mind, we ask that you please consider joining the 33 state medical boards that accept or require the Federation Credentials Verification Service (FCVS) physician assistant profile as verification of their credentials when they apply to your board for licensure. FSMB established the FCVS to verify the credentials of physicians (1996) and physician assistants (2001). Since that time, more than 165,000 physicians and physician assistants have used the service to establish a permanent, lifetime repository of primary-source verified core credentials.

We utilize the highest standards of all state medical boards. As a result of our commitment to our standards, FSMB recently received certification under NCQA's Credentials Verification Organization Certification Program for the following credentials elements: Education and Training; Ongoing Monitoring of Sanctions; Medicare/Medicaid Sanctions; and Medical Board Sanctions.

FCVS verifies the following credentials for physician assistants:

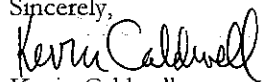
- Identity
- Undergraduate education
- Physician Assistant Education
- Post-graduate/specialty Physician Assistant Education
- NCCPA Examination Transcripts
- NCCPA Certification
- Board Action History

There is no cost to your board for this service. The physician assistant pays an initial application fee of \$145 for his/her profile to be sent to your board. If the physician assistant has already established an FCVS profile, the cost is only \$35 to have the profile sent to your board.

The full list of licensing boards accepting and requiring the FCVS physician assistant information profile can be found at www.fsmb.org/fcvs_paboard.html. For your convenience, I have also enclosed a sample letter of acceptance from your board that we would appreciate your completing and returning to us at your earliest convenience.

Please contact me at 817-868-5001 or at kcaldwell@fsmb.org to confirm that your board will accept or require the FCVS physician assistant profiles. I am also available to answer any questions and to provide additional information about FCVS.

Sincerely,



Kevin Caldwell

Senior Director, Federation Credentials Verification Service

Humayun J. Chaudhry, D.O.
Chief Executive Officer
Federation of State Medical Boards
400 Fuller Wiser Road, Suite 300
Euless, TX 76039-3855

Dear Dr. Chaudhry:

As of _____, the members of the _____ (Board) will allow **physician assistants** applying for licensure in this state to utilize the Federation Credentials Verification Service (FCVS) to obtain and report his/her "core" medical credentials. In doing so, the Board agrees to accept such documentation as provided by FCVS as primary source verification of those credentials.

It is understood by the Board that FCVS will collect all information and documents in accordance with the most recent version of the FCVS Policies and Procedures. FCVS acknowledges that the documentation it provides only serves to supplement portions of the Board's overall licensure process, and that the Board reserves the right to reject any or all portions of the documentation provided. It is also understood that physician assistant participation in this service is strictly voluntary, and that such services are provided at no cost to the Board.

As of the date of this letter, the Board authorizes FCVS to include the Board on the list of states which will accept FCVS-verified credentials and to publicize this information through appropriate channels. If you or FCVS staff have any further questions about the Board's decision, please do not hesitate to contact _____ at _____.

Respectfully,

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4) Meeting Date: 10/16/2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Fall Newsletter	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Board review of Fall Newsletter materials			
11) <div style="text-align: center;">Authorization</div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Signature of person making this request</div> <div>Date</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Supervisor (if required)</div> <div>Date</div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div>Executive Director signature (indicates approval to add post agenda deadline item to agenda)</div> <div>Date</div> </div>			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Chair's Corner

The Wisconsin Medical Examining Board has an important and vital role to play in ensuring that the physicians licensed in Wisconsin are safely taking care of and always acting in the best interests of their patients. As such, after robust discussions and drafts of language among the Board members as well as through the solicitation of input from stakeholders such as the Wisconsin Medical Society and the Wisconsin Hospital Association, the professional conduct rules, which are located in **Wisconsin Administrative Code Chapter MED 10, Unprofessional Conduct**, have been approved by the Legislature. A great deal of gratitude is owed not only to all of the aforementioned individuals but also to the wonderful staff of the Department of Safety and Professional Services (DSPS) who provided their insight and technical assistance in bringing this project to fruition.

Aside from the Board's re-crafting of MED 10, earlier in the year a series of articles was published in the Wisconsin State Journal by reporter David Wahlberg. While some may think that the accompanying level of scrutiny begat by highlighting actions of the Board without comprehensive knowledge of the facts and thought processes that went into making the individual decisions referenced is unwarranted, I believe that one of the things that makes this country great is having a free press and the right for each of us to have differences of opinion. Rather than ignoring or dismissing the issues raised regarding board actions against physicians who fell short of the standard of care, the Board wisely chose to engage in a process of self-reflection to see whether or not improvements are necessary. We have appointed a Committee charged with completing a comprehensive assessment of past Board sanctions in an effort to determine if the Board has been consistent and effective in the application of sanctions as we strive to protect the public.

In the Wahlberg series, reference was made to the Medical Board of Ohio as ranking among the top three state Boards for serious discipline against doctors in a study published by the Public Citizen Group. Notably, the State Medical Board of Ohio is a separate public entity, not one Board among many served by a single state umbrella agency and thus, it is able to set its own priorities. This is quite distinct from what occurs here in Wisconsin. In addition, the articles correctly stated that there have been a number of efforts by the Wisconsin Board to enhance its ability to investigate as well as to proactively prevent problems which have been stymied by some who no doubt have very good intentions. These efforts include: 1) giving the Board the statutory authority to independently launch an investigation of suspected wrongdoing without someone bringing forward a complaint; and 2) requiring criminal background checks of all license applicants, as do 36 other states, according to the Federation of State Medical Boards.

The article also reported that Ohio's board has developed guidelines imposing minimum and maximum penalties for various violations and that Wisconsin has no such guidelines. The Board's Committee reviewed the Ohio guidelines and, in fact, found that the minimums and maximums are not out of line with the range of sanctions utilized by the Wisconsin Medical Examining Board. Since the range of sanctions is similar, codifying minimums and maximums may not afford any real advantages. In our effort to better understand how the Board has performed over the years in sanctioning physicians, the Committee will review all of the sanctions applied over a ten year period of time, from January 1, 2003

thru December 31, 2012. With this data, the board will identify the remedies that have been meted out in isolated classifications of unprofessional conduct, examine the reasons for variation, and obtain more insight on how to consistently, effectively, and fairly bring the rule of law to bear in similar cases. This is, very simply, what ought to be done and what the public and physicians should expect.

On behalf of the Board, I wish to assure physicians, patients and families that your Wisconsin Medical Examining Board will continue to work with all parties in an effort to make sure that the health care delivered by Wisconsin physicians and those they supervise, is safe and appropriate. To that end, the actions of the fourth estate has provided us with both an opportunity to learn and to improve.

Michelangelo said, "Ancora imparo," which translates to "I'm still learning," and after all, this is what is expected of physicians, not only by our patients, but by each of us as members of this noble profession.

Note: The newly revised Wisconsin Administrative Code Chapter MED 10, Unprofessional Conduct, can be located here:

<https://health.wisconsin.gov/admrules/public/RetrieveRmoDocument?nDocumentId=39622>

Additional questions should be directed to Tom Ryan at 608-266-2112.

March 2013

Morgan Budde, Physician, Milwaukee, WI

The Medical Examining Board reprimanded and limited Dr. Morgan Budde's license to practice medicine and surgery for having been disciplined by the Commonwealth of Kentucky Board of Medical Licensure. The Kentucky Board indefinitely restricted Dr. Budde's license due to his addiction to controlled substances. The following limitations have been imposed upon Dr. Budde's Wisconsin license: 1) he must maintain compliance with all terms of the Kentucky Board of Medical Licensure; and 2) he must provide to the Wisconsin Board any document which alters the conditions of his practice of medicine in the Commonwealth of Kentucky including any documentation that restores his unrestricted license. Upon providing proof that he has successfully complied with all the terms of the Kentucky Board Order and has been granted an unrestricted Kentucky license to practice medicine, his license will be fully restored in Wisconsin.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002356-00008344.pdf>

Therese J. Gesteland, Physician, Milwaukee, WI

The Medical Examining Board reprimanded Dr. Therese J. Gesteland. On or about June 13, 2003, Dr. Gesteland saw her patient in the emergency room presenting with trouble speaking, left side facial weakness, problems swallowing, and dizziness. After obtaining a CT scan and performing a physical examination, Dr. Gesteland diagnosed the patient as having Bell's Palsy. She did not inform the patient of the other possible diagnoses such as a stroke or TIA nor did she instruct the patient to follow-up with other physicians or undergo tests in order to rule out the other significant conditions. The Board concluded that Dr. Gesteland failed to provide her patient with the information which a reasonable patient would need in order to make an informed decision about her health.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002352-00008340.pdf>

Charlotte E. Hovey, Physician, Oak Park, IL

The Medical Examining Board indefinitely suspended Dr. Charlotte E. Hovey's license to practice medicine and surgery. The basis of the suspension was an Interim Cessation of Practice Agreement between Dr. Hovey and the Colorado Medical Board. The Agreement was based on a report from the Colorado Physician Health Program that Dr. Hovey has a physical or mental illness or conditions that rendered her unsafe to practice medicine with reasonable skill and safety to patients. Dr. Hovey was also disciplined by the State of Washington Department of Health, Medical Quality Assurance Commission due in part to Dr. Hovey's failure to respond to a Statement of Charges sent by the Commission on June 5, 2012. Should Dr. Hovey wish to reinstate her license in Wisconsin she must provide documentation of her compliance with the terms and conditions imposed against her practice of medicine in Colorado and Washington. The Board may also require a personal appearance.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002355-00008343.pdf>

Gerard N. Kiernan, Physician, Keene, NH

The Medical Examining Board reprimanded Dr. Gerard N. Kiernan for having discipline taken against his license to practice medicine and surgery in another state. Dr. Kiernan and the New Hampshire Board of Medicine entered into a Settlement Agreement ordering Dr. Kiernan to take remedial education and pay a fine due to his failure in 2009 to appropriately diagnose and treat sepsis. The Board noted the remedial education completed by Dr. Kiernan in response to the New Hampshire Board Order as education which would have otherwise been ordered by the Board.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002358-00008346.pdf>

Dorothy A. Novak, Physician, Hayward, WI

The Medical Examining Board reprimanded Dr. Dorothy A. Novak for failing to appropriately diagnose an emergency room patient complaining of abdominal pain, constipation, fever, nausea and vomiting. Dr. Novak discharged the patient from emergency care and instructed the patient to drink four quarts of a polyethylene glycol solution containing electrolytes and then use another formulation of polyethylene glycol daily. Approximately 11 hours later the patient returned to the emergency room complaining of debilitating abdominal pain. The patient was examined by another physician and transferred to another hospital where it was determined that the patient had a perforated sigmoid diverticulitis with diffuse peritonitis and sepsis. A large inflammatory mass was found in the pelvis, and was identified as the sigmoid colon. The Board found that polyethylene glycol is not indicated for patients with an intestinal obstruction and that the patient should have been kept in the hospital for monitoring and a CT with contrast should have been obtained. The Board imposed a limitation requiring Dr. Novak to successfully complete a course in acute abdomen presentation and treatment.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002363-00008351.pdf>

James Turek, Physician, Fort Dodge, IA

The Medical Examining Board reprimanded and limited Dr. James Turek's license to practice medicine and surgery. While conducting a total abdominal hysterectomy and left salpingo-oophorectomy procedure, Dr. Turek noticed a small incidental cystotomy on the patient's right side. Dr. Turek repaired the injury with two layers of 2-0 Chromic. In so doing, Dr. Turek failed to properly place the sutures in the trigone, failed to recognize that the stitches were obstructing both ureters and failed to call a urologist for assistance. As a result the patient had to undergo another surgery to repair the damage one day after the first surgery. Dr. Turek must successfully complete the American Urogynecologic Society Review seminar.

March 20, 2013

[Ordershttp://online.drl.wi.gov/decisions/2013/ORDER0002357-00008345.pdf](http://online.drl.wi.gov/decisions/2013/ORDER0002357-00008345.pdf)

Jesse J. Van Bommel, Physician, Menomonee Falls, WI

The Medical Examining Board suspended the license of Dr. Jesse J. Van Bommel, for obtaining propofol, fentanyl and rocuronium by improperly using a patient name outside the course of legitimate professional practice. Dr. Van Bommel was also convicted of three misdemeanor counts; criminal damage to property and disorderly conduct in Waukesha County case no. 2012CF001212, and a misdemeanor battery under Waukesha County case no. 2012CF001435. Dr. Van Bommel may be granted a stay of the suspension of his license provided he petitions the Board and provides proof that he is in compliance with the terms of the Order.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002362-00008350.pdf>

Amit Waghray, Physician, Phoenix, AZ

The Medical Examining Board reprimanded Dr. Amit Waghray for having discipline taken against his license to practice medicine and surgery in another state. Dr. Waghray entered into an Order for Letter of Reprimand and Consent with the Arizona Medical Board due to inappropriate billing for services rendered while working as a hospitalist at John C. Lincoln North Mountain Hospital from December 2010 through May 2011. There were no additional limitations imposed on Dr. Waghray's Wisconsin license.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002360-00008348.pdf>

Kevin A. Weidman, Physician, Milwaukee, WI

The Medical Examining Board imposed a limitation on Dr. Kevin A. Weidman's license to practice medicine and surgery. In February of 2012, Dr. Weidman disrupted staff engaged in patient care and was repeatedly late in providing postoperative orders, both due to anger management issues. The Board required

Dr. Weidman to successfully complete an anger management course which shall be preapproved by the Board. Dr. Weidman must also have his therapist file quarterly reports summarizing his progress in therapy and current functioning.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002353-00008341.pdf>

John W. Zwiacher, Physician, Wasilla, AK

The Medical Examining Board reprimanded Dr. John W. Zwiacher for having discipline taken against his license to practice medicine and surgery in Alaska. Dr. Zwiacher entered into a Consent Agreement and Proposed Decision and Order with the Alaska Medical Board. The Alaska Medical Board reprimanded Dr. Zwiacher for failing to send lung fluid for cytology analysis from a patient who was subsequently diagnosed with stage IIIB non-small cell lung cancer; and erroneously answering “No” to the question of whether he had been a subject of an investigation or currently under investigation by any licensing jurisdiction. The non-disclosure was not an attempt to mislead; it was an error.

March 20, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002354-00008342.pdf>

April 2013

Michael J. Panzer, Physician, Appleton, WI

The Medical Examining Board reprimanded Dr. Michael J. Panzer for the following conduct. From approximately September 2007 until February 2009, Dr. Panzer provided psychiatric care for his patient’s severe depression. The patient was already taking Adderall, alprazolam and quetiapine which were prescribed by other doctors. Dr. Panzer added duloxetine and modafinil. Dr. Panzer did not discontinue any of his patient’s prior medications, nor did he consult any of the other physicians treating the patients regarding the potential for drug interaction. Some of the medications were above the maximum recommended dosages. The Board further ordered that the practitioner shall not prescribe, administer or

dispense any benzodiazepine for any patient at a daily dosage level which is more than 50% above the approved labeling for that product.

April 24, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002405-00008433.pdf>

May 2013

William B. Lyles, Physician, Green Bay, WI

The Medical Examining Board imposed a 20 day suspension upon Dr. William B. Lyles' license to practice medicine and surgery. The Board imposed the suspension due to Dr. Lyles' inappropriate prescribing of high doses of medications to multiple patients. The medications included alprazolam, Adderall, amphetamine, and lorazepam. During the course of one client's treatment, Dr. Lyles effectively delegated the prescribing of psychotropic medications to his social worker including allowing the social worker to provide sample medications such as Invega®, Lamictal®, Lunesta®, Luvox®, Pristiq®, and Requip® to his patient. The Board also imposed limitations including but not limited to the following. Dr. Lyles is required to refrain from prescribing, ordering, dispensing, administering or otherwise possessing any controlled substances or direct or request a physician assistant or advanced practice nurse prescriber to prescribe, order, dispense or administer any controlled substance on his behalf. Dr. Lyles must also certify that he does not have any sample prescription only medications in his place of practice.

May 15, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002437-00008490.pdf>

Michael N. Mangold, Physician, West Bend, WI

The Medical Examining Board indefinitely suspended Dr. Michael N. Mangold's license to practice medicine and surgery due to practicing medicine without a license during the time period from February 21, 2012 through March 22, 2012. During that time period, Dr. Mangold's license was suspended for delinquent

taxes. Dr. Mangold may not apply for a stay of the suspension for at least 60 days from the date of the Order.

May 15, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002433-00008486.pdf>

Donald Stonefeld, Physician, Rhinelander WI

The Medical Examining Board summarily suspended Dr. Donald Stonefeld's license to practice medicine and surgery due to inappropriate boundary violations between Dr. Stonfeld and his patient. On or about May 23, 2012, Dr. Stonefeld began providing psychiatric medication management to his 36-year-old female patient. During the course of the physician-patient relationship, Dr. Stonfeld exchanged text messages with his patient. During the course of the exchange of text messages Dr. Stonfeld requested a photograph of his patient, told his patient that she was "much prettier now" and offered this patient money. The summary suspension shall remain in effect until the final decision and order is issued.

May 15, 2013

<http://ice/enforcement/orders/OrderViewDoc.aspx?orderID=8487>

David L. Werwath, Physician, Virginia Beach, VA

The Medical Examining Board reprimanded Dr. David L. Werwath for having been disciplined by another state. The Virginia Board of Medicine limited the License of Dr. Werwath for his prescribing practices and his addiction to controlled substances.

May 15, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002435-00008488.pdf>

June 2013

Edward P. Hagen, Physician, Amery, WI

The Medical Examining Board reprimanded Dr. Edward P. Hagen for prescribing OxyContin® 20-30mg, oxycodone-acetaminophen (Percocet®) 10-325mg, zolpidem (Ambien®) 10mg, and cyclobenzaprine (Flexeril®) 10mg to a neighbor without having examined the neighbor, maintaining medical records, or consulting with neighbor's treating physician.

June 19, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002487-00008580.pdf>

Sarbjeet S. Sandhu, Physician, Milwaukee, WI

The Medical Examining Board reprimanded Dr. Sarbjeet S. Sandhu for failing to prescribe controlled substances at a dosage appropriate for a juvenile patient's weight, increasing the dosage in unreasonable increments, and failing to refer the patient for specialized treatment. By failing to appropriately prescribe the controlled substance and failing to respond appropriately to Patient A's reaction to the medication, Dr. Sandhu created an unacceptable risk that his patient would overdose.

June 19, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002486-00008579.pdf>

July 2013

Daniel Cabot, Physician, Superior, WI

The Medical Examining Board accepted Dr. Daniel Cabot's voluntary surrender of his registration and the right to renew his registration to practice medicine and surgery. Dr. Cabot voluntarily surrendered his credential due to having been evaluated for a health matter substantially related to the practice of medicine. Dr. Cabot did not agree or comply with the resulting treatment recommendations.

July 17, 2013

<file:///H:/MED%20BRD%20Discipline%20Summaries/2012/Summaries%20Fall%202012.docx>

Carol Haughey, Physician Assistant, Whitefish Bay, WI

The Medical Examining Board indefinitely suspended Mrs. Carol Haughey's license to practice as a physician assistant following a Drug Enforcement Administration execution of an Inspection Warrant at her home where she was found to have had 2,687 tablets of various controlled substances in her possession. Of these substances, Mrs. Haughey admitted to personally consuming alprazolam, soma, hydrocodone APA, and triazolam. Mrs. Haughey did not have a valid prescription for the controlled substances in her possession.

July 17, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002310-00008653.pdf>

Bruce W. Irvin, Physician, Libertyville, IL

The Medical Examining Board accepted Dr. Bruce W. Irvin's voluntary surrender of his license to practice medicine and surgery for having entered into a consent order with the State of Illinois, Department of Financial and Professional Regulation, Division of Professional Regulation. Dr. Irvin agreed to the consent order due to physical illness or loss of motor skill which resulted in the inability to practice medicine and surgery with reasonable skill or safety.

July 17, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002539-00008648.pdf>

Jong W. Kim, Physician, Bladenboro, NC

The Medical Examining Board reprimanded Dr. Jong W. Kim for being disciplined by the North Carolina Medical Examining Board. The North Carolina Medical Examining Board reprimanded Dr. Kim for having an inappropriate relationship with a patient. The Wisconsin Medical Examining Board also imposed the following limitations: Dr. Kim must be in compliance with the North Carolina Medical Board's consent order; he must provide a copy of any document issued by the North Carolina Medical Board to the Wisconsin Medical Examining Board;

and should he plan to practice again in Wisconsin, he must notify the Board at least 90 days prior to his return. Dr. Kim must inform the Board when he has completed the North Carolina Medical Board's consent order.

July 17, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002538-00008646.pdf>

August 2013

Angelo Alexander, Physician, Racine, WI

The Medical Examining Board accepted Dr. Angelo Alexander's registration and the right to renew his registration required to practice medicine and surgery in Wisconsin. After conducting a hysteroscopy with endometrial ablation and resection, Dr. Alexander's patient became hypotensive requiring resuscitation and was noted to have a significant abdominal distention. A vascular surgeon was called into the operating room to evaluate the patient and found a large left iliac artery tear. The Board made a finding of fact that Dr. Alexander fell below the standard of minimal competence by failing to recognize a left iliac artery tear.

August 14, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002566-00008696.pdf>

Stephen A. Haughey, Physician, Whitefish Bay, WI

The Medical Examining Board imposed an indefinite suspension of Dr. Stephen A. Haughey's license to practice medicine and surgery with an immediate stay of the suspension as long as Dr. Haughey remained in compliance with certain conditions. The Board disciplined Dr. Haughey for dispensing controlled substances in a manner that was not within the course of legitimate professional practice and for failing to maintain patient health care records consistent with the requirements of ch. Med 21. The limitations imposed on Dr. Haughey include: entering into a drug and alcohol treatment program; attending AA/NA meetings; abstinence from all personal use of alcohol and all over-the-counter medications;

submission to drug and alcohol screens 49 times per year; refraining from working in a setting in which he will have access to controlled substances; refraining from prescribing controlled substances for a 6 month period from the date of the order; and arranging for his supervisor to provide quarterly written reports to the Board. If Dr. Haughey does not have a supervisor he must obtain a professional mentor to provide the reports.

August 14, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002303-00008692.pdf>

Derek Heldzinger, Physician, Ooltewah, TN

The Medical Examining Board accepted the surrender of Dr. Derek Heldzinger's license and registration to practice medicine and surgery for an adverse action taken against him by the Georgia Composite Medical Board. The Georgia Composite Medical Board reprimanded Dr. Heldzinger and placed him on probation for two years for prescribing controlled substances to chronic pain patients who traveled from out-of-state without history and physical examinations sufficient to justify the prescriptions and without adequate training in pain management. The Board will not, at any time in the future, process or otherwise consider an application by Dr. Heldzinger for a license and registration to practice medicine and surgery in Wisconsin.

August 14, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002569-00008699.pdf>

George F. Knight, Physician, St. Petersburg, FL

The Medical Examining Board reprimanded Dr. George F. Knight for having a letter of admonition issued against him by Panel A of the Colorado Medical Board. The Colorado Board issued the letter of admonition due to Dr. Knight's failure to identify subdural hematomas that were visible in the initial CT studies of his patient's brain.

August 14, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002564-00008694.pdf>

Noemi A. Prieto, Physician, Milwaukee, WI

The Medical Examining Board imposed a three year suspension on Dr. Noemi A. Prieto's license to practice medicine and surgery. The Board suspended Dr. Prieto license for being found guilty of 16 counts of health care fraud in the United States District Court, Eastern District of Wisconsin, Case Number 11-CR-60. Dr. Prieto submitted false claims to the Wisconsin Medicaid Program for medical services provided by an unlicensed physician from August 17, 2006 through December 26, 2006. The Board also imposed the following limitations: compliance with the terms of the judgment in 11-CR-60; provide the Board with written verification that she is in compliance with the judgment in 11-CR-60 on February 2, 2014 and every six months thereafter; and provide evidence to the Board that she has passed the Special Purpose Examination (SPEX) before returning to the practice of medicine.

August 14, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002565-00008695.pdf>

Thomas D. Spera, Physician, Tucson, AZ

The Medical Examining Board reprimanded Dr. Thomas D. Spera for entering into an Agreed Order with the Texas Medical Board in which he was disciplined due to a 14 day hospital administrative suspension. The Texas Medical Board disciplined Dr. Spera for his abusive conduct towards staff members and his alleged failure to seek psychological evaluation and treatment.

August 14, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002563-00008693.pdf>

September 2013

Kent G. Brockmann, Physician, Lake Elmo, MN

The Medical Examining Board accepted the voluntary surrender of Dr. Kent G. Brockmann's license to practice medicine and surgery. During the time period that Dr. Brockmann was engaged in providing psychiatric therapy to his patient; he is alleged to have invited the patient to sit on his lap and to kiss the patient on her face and lips. On another occasion in approximately July of 2012, Dr. Brockman is alleged to have sat with this patient in her car and engaged in kissing his patient, unbuttoning her shirt, and caressing her breast. Dr. Brockman denies any unprofessional conduct.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002627-00008796.pdf>

Fredrick E. Ekberg, Physician, Duluth, MN

The Medical Examining Board accepted the surrender of Dr. Frederick E. Ekberg's registration to practice medicine and surgery due to prior discipline by the Minnesota Board of Medical Practice. The Minnesota Board disciplined Dr. Ekberg after he admitted that in 2010 and 2011 he prescribed controlled substances, including opioid medications, for family members. Dr. Ekberg failed to document the prescription in a patient health care record and failed to communicate his care with each family member's treating physician or health care provider.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002622-00008791.pdf>

Ronald Plemmons, Physician, Asheville, NC

The Medical Examining Board suspended Dr. Ronald Plemmons' license to practice medicine and surgery due to prior discipline by the North Carolina Medical Board. The North Carolina Board imposed discipline after Dr. Plemmons

approached an individual in a pharmacy who had been denied a request to fill an out-of-state prescription for OxyContin. Dr. Plemmons proceeded to write the individual a prescription for OxyContin without having examined the individual as a patient. The Board imposed an indefinite suspension of Dr. Plemmons' license and provided that Dr. Plemmons may not petition the Board for reinstatement of his license until he can demonstrate that he possesses an unlimited license in North Carolina.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002621-00008790.pdf>

Luann Moraski, Physician, Manitowoc, WI

The Medical Examining Board suspended Dr. Luann Moraski's license to practice medicine and surgery but imposed an immediate stay as long as Dr. Moraski complied with certain conditions. The Board disciplined Dr. Moraski for her conduct in December of 2012. At that time a mother of a patient had concerns about Dr. Moraski's behavior stating that Dr. Moraski smelled strongly of alcohol, had largely dilated pupils, slurred speech, and difficulty standing on her own. Dr. Moraski was admitted to the ICU for 48 hours of acute treatment. Treatment records indicate that Dr. Moraski's blood alcohol level was 0.37. The Board imposed the following limitations on Dr. Moraski's license: she must attend individual or group therapy sessions; her treater must provide reports on a quarterly basis; she must attend AA/NA meetings; she must abstain from all personal use of alcohol, controlled substances and over-the-counter medications; she must submit to drug and alcohol screens at a rate of 48 times per year; she must report her order to all subsequent employers; and she must arrange for written reports from her employer(s) to the Board on a quarterly basis.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002624-00008793.pdf>

Kenneth S. Raskin, Physician, Caledonia, WI

The Medical Examining Board reprimanded Dr. Kenneth S. Raskin. In January of 2014 Dr. Raskin saw a patient for induction of labor. Due to concerns about the fetal heart rate, Dr. Raskin attempted vacuum assisted delivery. Dr. Raskin applied a Mityvac® but suction was inadequate to further the infants' descent. Dr. Raskin attempted to use Kiwi® vacuum device, but again suction was inadequate to further the infant's decent. Over a period of approximately 46 minutes Dr. Raskin attempted a vacuum delivery nine times before deciding to proceed to a C-section. The Board found that Dr. Raskin's care fell below the standards of minimal competence because he did not recognize the need for a C-section in a timely manner. The Board imposed a limitation on Dr. Raskin's license by requiring him to successfully complete 10 hours of remedial education on the topic of working with intraoperative deliveries.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002623-00008792.pdf>

Davinder Kaur Sidhu, Physician, Pleasant Prairie, WI

The Medical Examining Board indefinitely suspended Dr. Davinder Kaur Sidhu's license to practice medicine and surgery. On December 14, 2012, Dr. Sidhu removed two 100 MCG vials of fentanyl from Pyxis® for a scheduled procedure. Records indicate that this patient's procedure was cancelled and not rescheduled. The record did not account for the two 100 MCG vials of fentanyl. Dr. Sidhu repeated the same behavior several times by removing different amounts of fentanyl on several separate occasions until approximately March 20, 2013. The Board imposed the following conditions on Dr. Sidhu's license: she must enter into a drug treatment program and attend group or individual therapy sessions; she must attend AA/NA meetings; she must abstain from all personal use of alcohol and over-the-counter medications; she must report to the Board all medications and drugs she takes and who prescribed the drugs; she must submit to drug and alcohol screens at a rate of 48 times per year; and she must arrange for her employer to file quarterly work reports to the Board.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002361-00008797.pdf>

Jerry N. Yee, Physician, Wauwatosa, WI

The Medical Examining Board accepted Dr. Jerry N. Yee's surrender of his license to practice medicine and surgery effective December 31, 2013 and his right to renew the license. The Board based its decision on a report that Dr. Yee had inappropriately prescribed buprenorphine, benzodiazepines, and stimulants to a patient who had a history of opiate addiction. Dr. Yee denies any misconduct in this matter. Until the license is surrendered, the Board further imposed a limitation on Dr. Yee's license prohibiting him from ordering, administering, dispensing or prescribing any controlled substance except buprenorphine. Buprenorphine may only be prescribed for patients who are established buprenorphine patients.

September 18, 2013

<http://online.drl.wi.gov/decisions/2013/ORDER0002628-00008800.pdf>

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Joshua Archiquette, Bureau Assitant		2) Date When Request Submitted: 10/4/13 <small>Items will be considered late if submitted after 4:30 p.m. and less than 8 work days before the meeting.</small>	
3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 10/16/13	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Speaking Engagement(s) Medical College of Wisconsin Department of Orolaryngology – December 5, 2013 – Ken Simons	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both		8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:
10) Describe the issue and action that should be addressed:			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

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State of Wisconsin
Department of Safety & Professional Services
AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Pamela Stach, Legal Counsel Medical Examining Board		2) Date When Request Submitted: 10/2/2013	
		Items will be considered late if submitted after 4:30 p.m. and less than: ■ 8 work days before the meeting for Paperless Boards ■ 14 work days before the meeting for all others	
3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 10/16/2013	5) Attachments: <input checked="" type="checkbox"/> Yes	6) How should the item be titled on the agenda page? Request for Motion delegating authority of the Board to determine probable cause to initiate disciplinary proceedings in conjunction with a petition for summary suspension.	
7) Place Item in: <input checked="" type="checkbox"/> Open Session	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input checked="" type="checkbox"/> Yes Pamela Stach, Legal Counsel	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: The Board should consider the attached motion to meet the statutory requirements under Wis. Stat. Sec. 448.03(4).			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Executive Assistant prior to the start of a meeting.			

Pursuant to Wis. Stat. sec. 448.03(4), the board chair, or if the chair is unavailable, the vice-chair, and two designated board members may consider a petition for summary suspension and, if appropriate, issue an order summarily suspending the license of a licensee .

This may be done outside of regularly scheduled board meetings when the danger to the public is such that a petition should be considered as quickly as possible.

Sec. 448.03(4) also requires that a notice of hearing commencing a disciplinary proceeding shall be issued no more than 10 days following the issuance of the order of summary suspension. Depending on the date the petition was considered and the order issued, this requirement may fall outside of a regularly scheduled meeting.

Since the Board must find probable cause to believe that the licensee is guilty of unprofessional conduct or negligence in treatment pursuant to Wis. Stat. sec. 448.02(3)(b), and issue the notice of hearing, the Board would need to delegate this authority to the individual board members considering the petition in order to meet the statutory time frame set forth above.

It is recommended to the Board that they consider the following motion:

The Board delegates to the Chair, or the Vice Chair if the Chair is unavailable, and the two board members selected to consider a petition for summary suspension pursuant to Wis. Stat. sec. 448.03(4), the authority to also make a determination of probable cause, if appropriate, on behalf of the Board with regard to any formal complaint and notice of hearing submitted in conjunction with the petition.